

Position Statement on Grandfathering of The Joint Review Committee on Education in Radiologic Technology (JRCERT)

Abstract

At the last Radiologic Technology Certification Committee (RTCC) Meeting in September 2006, it was brought forward that Frieda Taylor, Supervising Health Physicist (HP) and Sudana Kwok, Senior HP would be planning a visit to the Joint Review Committee on Education in Radiologic Technology (JRCERT) headquarters office. The purpose of the visit was to establish a clear delineation of any overlap between JRCERT and the Radiologic Health Branch's (RHB) processes for approval of Radiologic Technology (RT) Schools and clinical sites.

During the week of November 13, 2006, Ms. Taylor and Ms. Kwok met with JRCERT staff: Joanne Greathouse, Chief Executive Officer; Leslie Winter, Executive Associate Director; and Joey Battles, Associate Director. The purpose of the meeting was to acquire an overview of JRCERT and their role in the accreditation process. Additionally, Ms. Taylor and Ms. Kwok attended both the Outcomes Assessment Workshop and the Site Visitor Workshop.

Based on interviews with JRCERT staff, and reviews of JRCERT policies, procedures, and processes, RHB is unable to make a complete comparison of what is and what is not duplicated between JRCERT and the State of California. The "philosophy/concepts" between the two agencies are not compatible. The basis, in part, for the apparent incompatibilities are:

- JRCERT's mission is "competency based."
- California's Code of Regulations (CCR), title 17, is "process driven."

Therefore, RHB will not be moving forward with entering into a formal "cooperative agreement" with JRCERT that would "grandfather" the JRCERT accreditation and inspection process. RHB will continue to evaluate the feasibility for future consideration.

Analysis

The Health and Safety (H & S) Code, section 107045 (a) states, "The department shall approve schools for radiologic technologists that, in the judgment of the department, will provide instruction adequate to prepare individuals to meet requirements for certification as radiologic technologists under the Radiologic Technology Act (Section 27)." The H & S Code, section 107045 vests absolute and final authority with RHB to approve RT schools in California.

JRCERT "Standards" require a program to articulate its purposes; to demonstrate that it has adequate human, financial, and physical resources effectively organized for the accomplishment of its purpose; to document its effectiveness in accomplishing its purposes; and to provide assurances that it can continue to meet accreditation standards.

JRCERT does not prescribe to a specific approach to assessment. However, JRCERT allows a more subjective approach so that each individual program/school has the flexibility that is within their means to meet their objectives. As reflected in their standards, the goals of the JRCERT accreditation process are to: protect the student and the public; stimulate programmatic improvement; provide protective measures for federal funding or financial aid; and promote academic excellence.

The standards are used to enable each program/school to measure their goals, make useful decisions, and develop plans for improvement. The standards are written broadly enough to allow each program to structure its curriculum to meet the goals and objectives established and still maintain continuity with technology.

RHB recognizes the following as some of JRCERT's immediate strengths:

- JRCERT stays abreast with technology.
- Curriculum evaluation, i.e. didactic vs. clinical, is properly structured.
- Curriculum from programs/schools is in line with the American Society of Radiologic Technologist.
- JRCERT evaluates clinical site instructors.
- Each program submits annual reports.

However, areas where the JRCERT accreditation process demonstrates incompatibilities with California laws and regulations are as follows:

- I. Approval of Clinical Affiliation Sites.
- II. Inspection process.
- III. Investigation of allegations/complaints.

I. Clinical Affiliation Sites

JRCERT's process for approving clinical affiliation sites does not meet or exceed California requirements.

JRCERT accreditation policy number 11.404C, states in part, "JRCERT maintains accreditation standards providing that programs apply for recognition of clinical education settings and receive approval prior to placement of students."

However, as part of JRCERT's process of approving Clinical Affiliation Sites, JRCERT allows for the submission of current Joint Commission of Accreditation of Healthcare Organizations (JCAHO) or equivalent for the clinical education settings verification. JRCERT does not verify machine registration but relies on another accrediting body,

e.g. JCAHO. Further, JRCERT accepts American Registry of Radiologic Technologist (ARRT) as an acceptable credential for technologists. Thus, JRCERT recognizes but does not mandate that technologists submit California approved certificates/permits.

The State of California can accept neither JCAHO accreditation as an acceptable means of verifying machine registration nor ARRT certification of technologists in lieu of a State of California issued certificate/permit.

X-ray machine registration requirements are specified in title 17, CCR, section 30108 and 30115. Section 30108 states, "Every person possessing a reportable source of radiation shall register with the Department in accordance with the provisions of sections 30110 through 30146." Section 30115 states, "The registrant shall report in writing to the Department, within 30 days, any change in: registrant's name, address, location of the installation or receipt, sale, transfer, disposal or discontinuance of use of any reportable source of radiation."

II. Inspections:

JRCERT's inspection frequency does not meet or exceed California requirements.

JRCERT performs on-site visits every four to eight years depending on the accreditation period granted. Interim reports are only required for accreditation periods of eight years or more. Based on discussion with JRCERT, the following are examples of the process:

Accreditation	Interim Report Due	Inspection Occurs
8 years	4 years maximum	Between 8 years and 9 years
5 years	n/a	between 5 years and 6 years
3 years	n/a	between 3 years and 4 years

The H & S Code, section 107055, states "The department may inspect schools for radiologic technologists prior to approval and at other times as it deems necessary to determine that the purposes of the Radiologic Technology Act (Section 27) are being met, and **may require any reports** from schools as it deems necessary to carry out the purposes of the Radiologic Technology Act (Section 27)."

RHB "may" inspect a school and/or clinical affiliation sites at its own discretion. The H & S Code does not specify a prescriptive inspection frequency. At this time, RHB does not feel that an eight year inspection frequency is adequate.

III. Investigations of Allegations and/or Complaints

JRCERT processes do not meet or exceed California requirements.

JRCERT is governed by the Federal Department of Education, which allows any noncompliant school two years to comply.

In order for JRCERT to investigate an allegation or complaint, JRCERT requires it to be specifically tied to one of their standards.

Additionally, JRCERT does not have a procedure in place to investigate an allegation or complaint as it relates to California laws and regulations to ensure compliance.

RHB investigates all allegations and complaints. Depending on the seriousness of the investigated findings associated with the allegation and/or complaint, the outcome could lead to revocation or suspension of an RT school's certification.

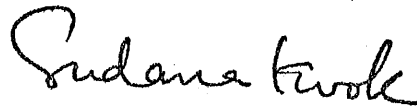
The following shows a comparison between JRCERT and RHB's processes for investigating allegations and/or complaints:

JRCERT	RHB
Step 1: Reviews allegation and/or complaint if associated with a standard.	Step 1: Senior HP assigns to staff.
Step 2: Convey to the program/school within three months because the recommendation is forwarded to the executive staff.	Step 2: Investigation, which may include an on-site visit. If an on-site visit, provides an overview at the exit conference to the school.
Step 3: The board deliberates (The board meets in April and October).	Step 3: Documentation of the investigation findings and reports submitted to the school (within 30 days). Depending upon the violation, school certification could be revoked or suspended or an immediate cease and desist could be invoked.
Step 4: The board will recommend a remedy (e.g. School placed on probation to allow time for remedy or withdrawal of the school's accreditation, but allowance to operate pending compliance with remedy). JRCERT can withdraw the school's accreditation, but the school can continue to operate.	Step 4: Remedy typically in place within 30 - 60 days of school's receipt of investigative findings.

CONCLUSION

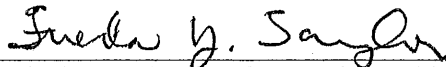
RHB has performed its first review to determine if RHB and JRCERT should enter into a "cooperative agreement" that would "grandfather" the JRCERT accreditation and inspection process. A complete comparison could not be performed because JRCERT's processes are "competency based," whereas California's regulatory requirements are "process driven." In those areas where a direct comparison could be made, RHB identified at least three areas where JRCERT processes do not meet or exceed California requirements. The three areas are: (1) Approval of Clinical Affiliation Sites; (2) Inspections; and (3) Investigations of Allegations and/or Complaints. Based on the aforementioned, RHB will not be moving forward with entering into a formal "cooperative agreement". This decision in no way impacts the current Radiologic Technology School Approval process.

Prepared by:



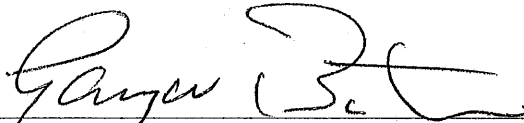
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